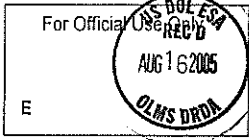


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



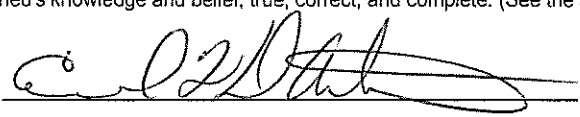
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>7239</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Ercole</u> <u>F. DiAntonio</u> P.O. Box, Bldg., Room No., if any <u>P.O. Box 417</u> Street _____ City <u>Pedricktown</u> State <u>N.J.</u> ZIP Code + 4 <u>08067</u>	4. Name, file number, and address of labor organization. Name <u>Construction &amp; General Laborers Local 172</u> Labor Organization File Number <u>004816</u> P.O. Box, Building and Room Number, if any _____ Street <u>604 Bordentown Rd.</u> City <u>Trenton</u> State <u>N.J.</u> ZIP Code + 4 <u>08610</u>
5. Position in labor organization. <u>President &amp; Business Manager</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u></u>	On <u>8/9/05</u> Date	<u>609-291-9100</u> Telephone Number

Name of Person Filing <b>Ercole F. DiAntonio</b>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>Laborers Health &amp; Safety Fund</b></p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any </p> <p>Street <b>905 16th St., NW</b></p> <p>City <b>Washington</b></p> <p>State <b>D.C.</b> ZIP Code + 4 <b>20006</b></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name </p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any </p> <p>Street </p> <p>City </p> <p>State ZIP Code + 4 </p>	<p>11.a. Nature of such dealing.</p> <p><b>Provides health &amp; safety assistance to related Funds and signatory employers.</b></p>
	<p>11.b. Approximate dollar value of such dealing.</p>
	<p>12.a. Nature of interest held or income received.</p> <p><b>6/6/04 Received jacket from the fund. Estimated at \$100.</b></p> <p><b>See Addendum A.</b></p>
	<p>12.b. Amount. <b>\$100.</b></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name </p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any </p> <p>Street </p> <p>City </p> <p>State ZIP Code + 4 </p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing	Ercole F. DiAntonio	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Zazzali, Fagella, Nowak, Kleinbaum &amp; Friedman</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>1 Riverfront Plaza</u></p> <p>City <u>Newark</u></p> <p>State <u>N.J.</u> ZIP Code + 4 <u>07102-5418</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>11.a. Nature of such dealing.</p> <p><u>Attorneys for Local Union</u></p> <p>11.b. Approximate dollar value of such dealing. <u></u></p> <p>12.a. Nature of interest held or income received.</p> <p><u>I received the use of football ticket(s) on occasion from the above referenced law firm but I do not recall the exact date or dates. To the best of my recollection the value of each ticket was approximately \$50. per ticket. See Addendum A.</u></p> <p>12.b. Amount. <u>See 12a.</u></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>14.a. Nature of payment.</p> <p><u></u></p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p> <p><u></u></p>



Name of Person Filing <b>Ercole F. DiAntonio</b>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).  Name <b>New Jersey Laborers Employers Cooperation &amp; Education Trust</b> Trade Name, if any: P.O. Box, Bldg., Room No., if any <b>P.O. Box 554</b> Street City <b>Cranbury</b> State <b>N.J.</b> ZIP Code + 4 <b>08512</b>	9. Business deals with:  <input checked="" type="checkbox"/> a. Labor Organization <input type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	11.a. Nature of such dealing.  <div style="border: 1px solid black; padding: 5px; min-height: 100px;">           I am a trustee for New Jersey Laborers Employers Cooperation &amp; Education Trust. (NJLECET)         </div> 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.  <div style="border: 1px solid black; padding: 5px; min-height: 100px;">           On 5/20/04 I attended a Angel of Hope Gala at the Hilton in Short Hills, N.J.         </div> 12.b. Amount. <b>Unknown</b>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.  <div style="border: 1px solid black; height: 150px;"></div>
13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?	14.b. Amount of payment.

Name of Person Filing <b>Ercole F. DiAntonio</b>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>New Jersey Laborers Employer Cooperation &amp; Education Trust</b></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any <b>P.O. Box 554</b></p> <p>Street _____</p> <p>City <b>Cranbury</b></p> <p>State <b>N.J.</b> ZIP Code + 4 <b>08512</b></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>I am a trustee for New Jersey Laborers Employers Cooperation &amp; Education Trust, (NJ LECET)</p> </div> <p>11.b. Approximate dollar value of such dealing. _____</p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>On 4/5/04 I attended a NJAC 2004 Spring Conference at the Marriott in Trenton, N.J.</p> </div> <p>12.b. Amount. <b>Unknown</b></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. _____</p>

Name of Person Filing	Ercole F. DiAntonio	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name New Jersey Laborers Employers Cooperation & Education Trust

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 554

Street

City Cranbury

State N.J. ZIP Code + 4 08512

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State  ZIP Code + 4

11.a. Nature of such dealing.

I am a trustee for New Jersey Laborers Employers Cooperation & Education Trust (NJLECET)

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

On 1/18/04 I attended a Reception in Florida for the Tri-Fund Conference at the Disney Yacht & Beach Club.

12.b. Amount. \$104.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State  ZIP Code + 4

14.a. Nature of payment.

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13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing <b>Ercole F. DiAntonio</b>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name **New Jersey Laborers Employers Cooperation & Education Trust**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **P.O. Box 554**

Street

City **Cranbury**

State **N.J.** ZIP Code + 4 **08512**

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

I am a trustee for New Jersey Laborers Employers Cooperation & Education Trust. (NJ LECET)

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

On 1/20/04 I attended a trustee dinner in Grand Cypress, Florida at the Tri-Fund Conference.

12.b. Amount. \$137.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.



Name of Person Filing <b>Ercole F. DiAntonio</b>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name **Heavy & General Laborers Welfare Funds of New Jersey**  
 Trade Name, if any:   
 P.O. Box, Bldg., Room No., if any   
 Street **700 Raymond Blvd.**  
 City **Newark**  
 State **N.J.** ZIP Code + 4 **07105**

9. Business deals with:

- ☒ a. Labor Organization  
☐ b. Trust  
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name   
 Trade Name, if any:   
 P.O. Box, Bldg., Room No., if any   
 Street   
 City   
 State ZIP Code + 4

11.a. Nature of such dealing.

**Employee Benefit Fund for members and other persons represented by Local Union 172.**

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

**In the course of the year, I attended 5 or 6 Heavy & General Laborers Trust Fund meetings as Trustee. I do not have a specific recollection of which days I ate lunch & which days I did not. Lunch cost the Welfare Fund \$30. Other than the above, I have no specific recollection or record of any other benefits received from the Welfare Fund.**

12.b. Amount.

**See 12a**

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name   
 Trade Name, if any:   
 P.O. Box, Bldg., Room No., if any   
 Street   
 City   
 State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

PARENT ORGANIZATION:  
LABORERS INTERNATIONAL UNION OF  
NORTH AMERICA



**LOCAL**



AFFILIATED WITH:  
AMERICAN FEDERATION OF LABOR-CIO  
NJ HEAVY & GENERAL CONSTRUCTION  
LABORERS' DISTRICT COUNCIL  
NJ STATE BUILDING TRADES COUNCIL

**172** OF  
**SOUTH JERSEY**

## CONSTRUCTION AND GENERAL LABORER'S UNION

(609) 291-9100 • Raymond M. Pocino Building • 604 Bordentown Rd., Trenton, NJ 08610 • FAX (609) 291-0158

**E. FRANK DI ANTONIO**  
*President & Business Manager*

**ANTHONY CAPACCIO**  
*Secretary-Treasurer*

**LACEY WALKER**  
*Vice President*

**DEREK WEBER**  
*Recording Secretary*

**NABIH SHEHATA**  
*Executive Board*

**DONALD LANAHAN**  
*Executive Board*

**JOSEPH DE MARCO, JR.**  
*Executive Board*

**FRANK A. DI ANTONIO**  
*Sergeant-at-Arms*

**GARY ROMANOWSKI**  
*Auditor*

**BRENDAN ROSENBERG**  
*Auditor*

**RUSSELL DAVIS**  
*Auditor*

### Addenda To The LM-30

#### Addendum A (Unsolicited Gifts or Promotional Items)

In 2004, I recall that I was given a jacket from the New Jersey Laborers Health & Safety Trust as a complimentary promotional item while attending a Conference. I also received the use of football ticket (s) on one occasion from the law firm of Zazzali, Fagella, Nowak, Kleinbaum & Friedman. At no time did I solicit the items. I have no knowledge as to the exact value of the jacket and to my recollection the value of the tickets were approximately \$50.00 each.

PARENT ORGANIZATION:  
LABORERS INTERNATIONAL UNION OF  
NORTH AMERICA



# LOCAL



AFFILIATED WITH:  
AMERICAN FEDERATION OF LABOR-CIO  
NJ HEAVY & GENERAL CONSTRUCTION  
LABORERS' DISTRICT COUNCIL  
NJ STATE BUILDING TRADES COUNCIL

## 172 OF SOUTH JERSEY

### CONSTRUCTION AND GENERAL LABORER'S UNION

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*Auditor*

**BRENDAN ROSENBERG**  
*Auditor*

**RUSSELL DAVIS**  
*Auditor*

#### Addenda To The LM-30

#### Addendum B (Unsolicited Holiday Gifts)

On one occasion in 2004, particularly during the Christmas holiday season, I recall that I was given a holiday Christmas basket. At no time did I solicit the item and it was sent to my office without my prior knowledge or authorization. I did not retain possession of this item, as I shared it with the individuals in my office. My actions were in line with published Office of Government Ethics guidelines, which state, "When it is not practical to return a tangible item because it is perishable, the item may, at the discretion of the Employee's supervisor or an agency ethics official, be given to an appropriate charity, shared within the recipient's office, or destroyed."

PARENT ORGANIZATION:  
LABORERS INTERNATIONAL UNION OF  
NORTH AMERICA



# LOCAL



AFFILIATED WITH:  
AMERICAN FEDERATION OF LABOR-CIO  
NJ HEAVY & GENERAL CONSTRUCTION  
LABORERS' DISTRICT COUNCIL  
NJ STATE BUILDING TRADES COUNCIL

## 172 OF SOUTH JERSEY

### CONSTRUCTION AND GENERAL LABORER'S UNION

(609) 291-9100 • Raymond M. Pocino Building • 604 Bordentown Rd., Trenton, NJ 08610 • FAX (609) 291-0158

August 12, 2005

**E. FRANK DI ANTONIO**  
*President & Business Manager*

**ANTHONY CAPACCIO**  
*Secretary-Treasurer*

**LACEY WALKER**  
*Vice President*

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**BRENDAN ROSENBERG**  
*Auditor*

**RUSSELL DAVIS**  
*Auditor*

U. S. Department of Labor  
Employee Standards Administration  
Office of Labor Management Standards  
200 Constitution Avenue, NW  
Room N-5616  
Washington, D.C. 20210

**Re: Form LM-30 Filing for Ercole F. DiAntonio**

Dear Sir or Madam:

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records and relied upon my best recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that an employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that in that circumstance I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of reportable events in 2004.

Sincerely,

*Ercole F. DiAntonio* (ps)  
Ercole F. DiAntonio  
President & Business Manager